



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Confirmation No. 3992

Applicants: Richard J. Melker et al. Examiner: E. F. Winakur

Assigned

Serial No.: 10/749,471 Art Unit: 3736

Filed: 12/30/2003

For: NOVEL SPECIALLY CONFIGURED NASAL PULSE

OXIMETER/PHOTOPLETHYSMOGRAPHY

PROBES, AND COMBINED NASAL PROBE/CANNULA, SELECTIVELY WITH SAMPLER FOR CAPNOGRAPHY,

AND COVERING SLEEVES FOR SAME

BOX MISSING PARTS Commissioner for Patents P. O. Box 1450 Alexandria, Virginia 22313-1450

REQUEST FOR EXTENSION OF TIME

Applicants request a two-month extension of time through and including September 15, 2005, to respond to the Office Action dated April 15, 2005, in the application referred to above. A check in the amount of \$225.00 accompanies this paper.

09/21/2005 HLE333 00000006 10749471

01 FC:2252 225.00 OP

Timothy H. Van Dyke Reg. No. 43,218

Respectfully submitted,

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Serial No. 10/749,471

CERTIFICATE OF MAILING

SEP 1 9 2005

I HEREBY CERTIFY that this Request for Extension of Time is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Amendments, Alexandria, Virginia 22313-1450 15th day of September 2005.

Timothy H. Van Dyke

PTO/SB/17 (12-04)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
a Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

/ و۱	225.00	
(\$)	223.00	

Complete if Known					
Application Number	10/749,471				
Filing Date	12/20/2003				
First Named Inventor	Richard J. Melker et al.				
Examiner Name	E. F. Winakur				
Art Unit	3736				
Attorney Docket No.	10457-042				

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METHOD OF PAYMEN	IT (check al	l that apply)						
Check Credit	Card	Money Order	None	Other (please identify)):		
Deposit Account Deposit Account Number: Deposit Account Name:								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s)								
WARNING: Information on th	under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION					•			
1. BASIC FILING, SEA			N FEES					
	FILING	FEES Small Entity	SEARCH	H FEES Small Entity		TION FEES Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Pai	d (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FE	ES						<u>Sı</u> <u>Fee (\$)</u>	mall Entity Fee (\$)
Fee Description Each claim over 20 or, f	or Reissues	. each claim o	ver 20 and m	ore than in t	he original r	oatent	50	25
Each independent claim							tent 200	100
Multiple dependent clair			-				360	180
Total Claims	Extra Claim		<u>Fee Pai</u>	<u>d (\$)</u>		ependent Claim		
20 or HP = HP = highest number of total		_ X r. if greater than 20	_ =		<u>Fee (\$)</u>	Fee Pa	<u>iia (\$)</u>	
Indep. Claims	Extra Claim	-		<u>d (\$)</u>	-			
3 or HP = HP = highest number of inder			=					
3. APPLICATION SIZE		paid for, if greater	tiai 5					
If the specification and		exceed 100 she	eets of paper	, the applica	tion size fee	due is \$250 (\$	\$125 for sma	all entity)
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
		/ 50 =		ound up to a	Whole Humber	,		
4. OTHER FEE(S) Non-English Specific	ication ©	130 fee (no sm	all entity die	count)			rees	Paid (\$)
Non-English Specification, \$130 fee (no small entity discount) Other: Two Month Extension of Time 225.00								
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SUBMITTED BY		/		
Signature	1- /-	f	Registration No. 43,218 (Attorney/Agent)	Telephone 407-926-7726
Name (Print/Type)	Timothy H. Y	an Dyke		Date 9/15/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**